



# APPLICATION SPECIAL USE PERMIT

## ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

☒ **Change of Ownership**      ☐ **Minor Amendment**

[must use black ink or type]

**PROPERTY LOCATION:** 1905 MOUNT VERNON AVE, ALEXANDRIA, VA 22301

**TAX MAP REFERENCE:** 034.04-10-25

**ZONE:** CL

### APPLICANT

**Name:** ROSEMERI ESPINOZA.DBA ROSEMARINO D'ITALIA, LLC

**Address:** 6012 LOWELL AVE, ALEXANDRIA, VA 22312

### PROPERTY OWNER

**Name:** SCOTT MICHELL and LARRY HIRSH

**Address:** 2417 C. MOUNT VERNON AVE, ALEXANDRIA, VA 22301

**SITE USE:** RESTAURANT

☒ **THE UNDERSIGNED** hereby applies for a Special Use Permit for **Change in Ownership**, in accordance with the provisions of Article XI, Division A, Section 11-503 (5)(f) of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

☒ **THE UNDERSIGNED**, having read and received a copy of the special use permit, hereby agrees to comply with all conditions of the current special use permit, including all other applicable City codes and ordinances.

☒ **THE UNDERSIGNED** hereby applies for a Special Use Permit for **Minor Amendment**, in accordance with the provisions of Article XI, Division A, Section 11-509 and 11-511 of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

☒ **THE UNDERSIGNED**, having obtained permission from the property owner, hereby requests this special use permit. The undersigned also attests that all of the information herein required to be furnished by the applicant are true, correct and accurate to the best of his/her knowledge and belief.

ROSEMERI ESPINOZA

Print Name of Applicant or Agent

1905 MOUNT VERNON AVE

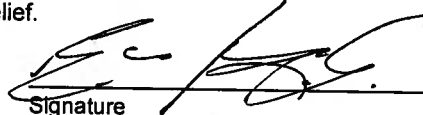
Mailing/Street Address

ALEXANDRIA

22301

City and State

Zip Code

  
Signature

703.928.0320

Telephone #

703.299.8907

Fax #

rosemeriespinoza@hotmail.com

Email address

01/28/2013

Date

### DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

Application Received: \_\_\_\_\_

Legal advertisement: \_\_\_\_\_

ACTION - PLANNING COMMISSION \_\_\_\_\_

Fee Paid: \$ \_\_\_\_\_

ACTION - CITY COUNCIL: \_\_\_\_\_

The following information must be furnished to the Department of Planning and Zoning to determine if the current use conducted on the premises complies with the special use permit provisions and all other applicable codes and ordinances.

**1. Please describe prior special use permit approval for the subject use.**

Most recent Special Use Permit # 2011-0057

Date approved: 09 / 13 / 2011  
month day year

Name of applicant on most recent special use permit SAWKETT CORPORATION

Use RESTAURANT

**2. Describe below the nature of the existing operation in detail** so that the Department of Planning and Zoning can understand the nature of the change in operation; include information regarding type of operation, number of patrons served, number of employees, parking availability, etc. (Attach additional sheets if necessary.)

WILL KEEP SAME TYPE OF OPERATION, THERE ARE NO CHANGES REQUESTED AT  
THIS TIME.

JUST CHANGING OWNERSHIP

**3. Describe any proposed *changes* to the business from what was represented to the Planning Commission and City Council** during the special use permit approval process, including any proposed changes in the nature of the activity, the number and type of patrons, the number of employees, the hours, how parking is to be provided for employees and patrons, any noise emitted by the use, etc. (Attach additional sheets if necessary)

NO CHANGES BESIDES OWNERSHIP

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page, possibly from a composition book. The edges of the paper are slightly irregular, suggesting it might be a scan of a physical document. There is no handwriting or other markings on the page.

4. Is the use currently open for business? ☐ Yes ☒ No

If the use is closed, provide the date closed.

12 / 31 / 2012  
month day year

5. Describe any proposed changes to the conditions of the special use permit:

NO CHANGES REQUESTED AT THIS TIME, ONLY OWNERSHIP

6. Are the hours of operation proposed to change? ☐ Yes ☒ No

If yes, list the current hours and proposed hours:

Current Hours:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed Hours:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Will the number of employees remain the same? ☒ Yes ☐ No

If no, list the current number of employees and the proposed number.

Current Number of Employees:

UNKNOWN PRIOR #

Proposed Number of Employees:

5 FOR NOW

8. Will there be any renovations or new equipment for the business? X Yes      No

If yes, describe the type of renovations and/or list any new equipment proposed.

REPLACEMENT OF THE DISWASHER, UPGRADED

9. Are you proposing changes in the sales or service of alcoholic beverages?      Yes X No

If yes, describe proposed changes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10. Is off-street parking provided for your employees?**

If yes, how many spaces, and where are they located?

☐ Yes ☒ No

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**11. Is off-street parking provided for your customers?**

If yes, how many spaces, and where are they located?

☐ Yes ☒ No

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**12. Is there a proposed increase in the number of seats or patrons served?**

If yes, describe the current number of seats or patrons served and the proposed number of seats and patrons served. For restaurants, list the number of seats by type (i.e. bar stools, seats at tables, etc.)

☐ Yes ☒ No

Current:

Proposed:

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**13. Are physical changes to the structure or interior space requested?**

If yes, attach drawings showing existing and proposed layouts. In both cases, include the floor area devoted to uses, i.e. storage area, customer service area, and/or office spaces.

☐ Yes ☒ No**14. Is there a proposed increase in the building area devoted to the business?**

If yes, describe the existing amount of building area and the proposed amount of building area.

☐ Yes ☒ No

Current:

Proposed:

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**15. The applicant is the (check one)**☐ Property owner ☒ Lessee☐ other, please describe: \_\_\_\_\_**16. The applicant is the (check one)**☒ Current business owner ☐ Prospective business owner☐ other, please describe: \_\_\_\_\_

17. Each application shall contain a clear and concise statement identifying the applicant, including the name and address of each person owning an interest in the applicant and the extent of such ownership interest. If the applicant, or one of such persons holding an ownership interest in the applicant is a corporation, each person owning an interest in excess of ten percent (10%) in the corporation and the extent of interest shall be identified by name and address.

For the purpose of this section, the term "ownership interest" shall include any legal or equitable interest held in the subject real estate at the time of the application. If a nonprofit corporation, the name of the registered agent must be provided.

**Please provide ownership information here:**

ROSEMERI ESPINOZA

6012 LOWELL AVE, ALEXANDRIA, VA 22312

100 % OWNER



DOING  
THE MOST  
GOOD™

William Booth, *Founder*  
Linda Bond, *General*  
Commissioner David Jeffrey, *Territorial Commander*  
Lt. Colonel John R. Jones, *Divisional Commander*  
Major Lewis Reckline, *National Capital Area Commander*  
Lieutenants Trey and Sheri Jones, *Corps Officers*

January 17, 2013

**RE: Parking**

To Whom It May Concern:


I am writing on behalf of The Salvation Army Alexandria Citadel Corps to confirm that an agreement has been made between The Salvation Army and the Rose Marino D' Italia restaurant.

Our agreement with Ms. Rose Marie Espinoza, the proprietor of the restaurant says that we will offer no more than ten parking spaces from our parking lot for their customers during their hours of operation.

If there are any questions or concerns, please feel free to contact me.

Sincerely,

Lt. Trey Jones  
Corps Officer

Date: January 17<sup>th</sup>, 2013  
To: Rosemeri Espinoza  
From: Paula Rutherford, President   
Re: Use of Just ASK Parking Lot at 1900 Mt. Vernon Avenue, Alexandria, Virginia

Just ASK agrees to the use of up to three parking spaces in the company's parking lot at 1900 Mt. Vernon Avenue, Alexandria, Virginia, by patrons of Rosemarino D'Italia, located at 1905 Mt. Vernon Avenue..

The hours for use of these parking spaces by patrons of Rosemarino D'Italia, are from 5:30 pm to 11:00 pm.

No signs are to be posted at Rosemarino D'Italia or on Just ASK property.

This agreement can be terminated by either party with thirty (30) days written notice.





1800 Mt Vernon Ave  
Alexandria VA 22301

January 21st, 2013

To Whom It May Concern:

From this date, January 21<sup>st</sup>, 2013 Arlandria Floors, Inc. of 1800 Mt Vernon Avenue Alexandria VA 22301, John Bresnahan, President, is furnishing Rosemarino d' Italia of 1905 Mt Vernon Avenue Alexandria VA 22301, Rosemeri Espinoza, owner, the use of three (3) parking spaces on a daily basis from 4:00 PM until 11:00 PM until further notice.

Sincerely,

A handwritten signature in black ink, appearing to read "John Bresnahan". The signature is fluid and cursive, with a large initial "J" and a long, sweeping underline.

Arlandria Floors

January 28, 2013

Nathan Randall  
City of Alexandria  
Department of Planning and Zoning  
301 King Street, Ste. 2100  
Alexandria, VA 22314

Dear Mr. Randall:

Small note in reference to the Parking Places; please do not think that we went door-to-door soliciting for parking spaces, the only place that Mrs. Espinoza requested, was at the Salvation Army, and was granted 10 spaces; counting on the 8 spaces that the landlord was to provide, according to the lease contract, she was in compliance, but the landlord was not able to fulfilled his obligation which caused Mrs. Espinoza to talk to her friends at the Arlandria Floors and with Mrs. Rutherford and they both offered their help in providing spaces after their business hours , as you can see on the letters attached. Your input on the matter and any changes that you will propose to be in compliance, will be greatly appreciated, and it is pending upon your approval.

As you well know spaces are very hard to find and she was not aware that it is needed 1 space for every 4 patrons, she was under the assumption that since was no other changes, besides ownership, the prior spaces were sufficient to operate.

Thank you very much

WATER  
STATION

BATHROOM

BATHROOM

KITCHEN

EXIT

